FAX TRANSMISSION	RECEIVED CENTRAL FAX CENTER
	JUL 1 4 2006
DATE: July 14, 2006	
PTO IDENTIFIER: Application Number 09/841,872-Conf. #6150 Patent Number	
Inventor: Donal DOHERTY et al.	
MESSAGE TO: US Patent and Trademark Office	
FAX NUMBER: (571) 273-8300	
FROM: BIRCH, STEWART, KOLASCH & BIRCH, LLP	
Joseph A. Kolasch	
PHONE: (703) 205-8000	
Attorney Dkt. #: 4669-0101P	
PAGES (Including Cover Sheet):2	
CONTENTS: Request for Withdrawal as Attorney or Agent (1 page) Certificate of Transmission (1 page)	
If your receipt of this transmission is in error, please notify the collect call to sender at (703) 205-8000 and send the original mail at the address below.	is firm immediately by transmission to us by return
This transmission is intended for the sole use of the individual is addressed, and may contain information that is privileg exempt from disclosure under applicable law. You are he dissemination, distribution or duplication of this transmis than the intended addressee or its designated agent is strictly	ed, confidential and reby notified that any sion by someone other
BIRCH, STEWART, KOLASCH & BIRCH, LLP 8110 Gatehouse Road, Suite 100 East, P.O. Box 747, Falls Church, Telephone: (703) 205-8000 Facsimile: (703) 205-	Virginia 22040-0747 8050

FAX NO. 703 205 805**JUL 1 4 2006** P. 02

PTO/SB/83 (01-06)
Approved for use through 12/31/2008. OMB 0551-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
and to a collection of information unless it displays a valid OMB control number.

Under the Paperwork Reduction Act of 1995, no persons are	Application Number	09/841,872-Conf. #6150
	Filing Date	April 26, 2001
REQUEST FOR WITHDRAWAL	First Named Inventor	Donal DOHERTY
AS ATTORNEY OR AGENT	Art Unit	3624
AND CHANGE OF CORRESPONDENCE ADDRESS	Examiner Name	K. S. Campen
CORREST SILES LIVE SILES	Attorney Docket Number	4669-0101P

Albinay Boards (14)	
To: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	
Please withdraw me as attorney or agent for the above identified pa	atent application, and
all the attorneys/agents of record.	
the attorneys/agents (with registration numbers) listed on the	attached paper(s), or
Community Customer Number	02292
NOTE: This box can only be checked when the power of attorn practitioners associated with a customer number.	ney of record in the application is to all the
The reasons for this request are: Non-payment of outstanding bills.	
CORRESPONDENCE A	DDRESS
The correspondence address is NCT allicates by the transition of the correspondence address and direct all future of the address associated with Customer Number: OR	correspondence to:
× Firm or Individual Name ISCAN LIMITED	
Address	
20 Belvedere Place City Dublin State	ZIP 1
City Dublin Gains Country Ireland	
Telephone 353/0-87-684-9794 Email	
Signature James (Ella, G	
Name James T. Eller, Jr.	Registration No. 39,538
Date July 14, 2006	Telephone No. (703) 205-8000
NOTE: Withdrawal is effective when approved rather than whon received. Unloss the expiration date of a time period for response or possible extension period, the	s there are at least 30 days between approved. request to withdraw is normally disapproved.
I hereby certify that this paper (along with any paper reforred to as being attached the date shown below with sufficient postage as First Class Mall, in an envelope at Alexandria, VA 22313-1450. Reted: Intv 14 2008 Signature:	or enclosed) is being deposited with the U.S. Postal Service of ddrussed to: Commissioner for Patonte, P.O. Box 1450, (Joseph A. Kolasch)
Oated: July 14, 2008 Signature:	

JTE/JAK/njp

JUL-14-2006 FRI 03:14 PM BSKB

FAX NO. 703 205 CENTRAL FAX CENTER

P. 03

Approved for use through 07/31/2006. OMB 0651-0031
U. S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a pollection of information unless it displays a valid OMB control number.

Application No. (if known): 09/841,872

Attorney Docket No.: 4669-0101P

Certificate of Transmission under 37 CFR 1.8	
l heret	y certify that this correspondence is being facsimile transmitted to the United
States	Patent and Trademark Office.
on	July 14, 2006 - Date
	Signature Nancy Purks Typed or printed name of person signing Certificate
Regi	stration Number, if applicable Telephone Number
Note:	Each paper must have its own certificate of transmission, or this certificate must identify each submitted paper.
	Request for Withdrawal as Attorney or Agent (1 page)